CEST AVAILABLE COPY

DATENT ADDITION SEE DETERMINATION DECO									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									,	<u>ማ</u> ር ሊ	C 5 <i>j</i>	<i>4</i> .0-			
<u> </u>								0988687							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY			
T	OTAL CLAIMS		32					RATE		FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		ВА	BASIC FEE		355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			32minus 20=		. 12		,	X\$ 9=		108	OR	X\$18=			
INDEPENDENT CLAIMS			€ minus 3 =		. 3			X40=				X80=			
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				.125		20	OR					
* If the difference in column 1 is less than zero, enter "0" in column 2									+135= TOTAL 58		OR OR	+270=			
CLAIMS AS AMENDED - PART II										<u>س د</u>	Jon	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)							MALL	_EN	ITITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	Т	ADDI- IONAL FEE		RATE	ADDI- TIONAL FÉE		
	Total	.23	Minus	3	32	= /	×	(\$ 9=			OR	X\$18=			
	Independent	1. 2	Minus	(<u>e</u>	= /	×		7		OR	X80= /	/		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 	135≠	1	·	OR	+270=			
		L	TOTAL	+			TOTAL								
		ADDIT. FEEOR ADDIT. FEE													
AMENDMENT B	(Column 1) CLAIMS			(Colun	ST			·		DDI-		· · ·	ADDI-		
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA	R	ATE	TI	ONAL FEE		RATE	TIONAL		
	Total	•	Minus	••		=	Х	\$ 9=			OR	X\$18=			
	Independent	•	Minus	•••		=	×	40=	T		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╁				· · · · · ·		
								35=	$oldsymbol{\perp}$		OR	+270=			
			TOTAL IT. FEE			OR ,	TOTAL ADDIT. FEE								
	A COLUMN TO A STATE OF THE STAT	(Column 1)	Carried State Constitution	(Colum		(Column 3)									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA	R	ATE	TIC	DDI- ONAL EE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		= ·	X	\$ 9=			OR	X\$18=	· -		
	Independent	•	Minus	***	=			 40=	十		·	Ven			
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		 		┢		OR	X80=			
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OF												TOTAL DDIT. FEE			
1	The "Highest Num	ber Previously Paid	f For (Total or	Independe	nt) is the	highest number	lound in	the ap	prop	riate box	in colu	ımn 1.			